F06000005099

(Requestor's Name) (Address)				
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COVER LETTER

	nendment Section vision of Corporations
SUBJE	T: Fairmont Hotels & Resorts (U.S.) Inc.
	(Name of Corporation)
DOCU	ENT NUMBER: F06000005099
The end	sed withdrawal application and fee are submitted for filing.
	urn all correspondence concerning this the following:
	Гага Осатро
	(Name of Person)
	Fairmont Hotels & Resorts (U.S.) Inc.
	(Firm/Company)
	155 Wellington Street West, Suite 3300
	(Address)
	Toronto, ON M5V 0C3
	(City/State and Zip code)
For furt	er information concerning this matter, please call:
Tara Oca	po 416 874-2936 at ()
Enclose	(Name of Person) (Area Code & Daytime Telephone Number) is a check for the amount:
\$ 35	ling Fee \$\int \\$43.75 \ \text{Filing Fee & }\\$43.75 \ \text{Filing Fee & }\\$52.50 \ \text{Filing Fee,} \\ Certificate of Status & Certified Copy & Certificate of Status & Certified Copy (Additional copy is Enclosed) Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

Division of Corporations

Tallahassee, FL.32314

P.O. Box 6327

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

	Fairmont Hotels & Resorts (U.S.) Inc.		
	(Name of Corporation)	5	SECRE
	F06000005099	7	유류
	(Document Number of Corporation	(if known)	SECRETARY OF SAFFONS
	Delaware		2: 3
	(Incorporated Under Laws	of)	86 ×
This cappoir the tin	arily surrenders its authority to transact business or conduct corporation revokes the authority of its registered agent in its the Department of State as its agent for service of proc ne it was authorized to transact business or conduct affairs in following is a current mailing address for the corporation:	a Florida to accept service on its be ess based on a cause of action arisir	
	Attention: Legal Department, 155 Wellington Street West, Suite	3300	
	(Mailing Address)		
	Toronto, ON M5V 0C3		
	(City/ State /Zip)		
The co	orporation agrees to notify the Department of State in the fu	ture of any change in its mailing add	ress.
	P. McMallan	May 22, 2015	
	(Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	-
	Paula A. McMullan	Corporate Secretary	
	(Typed or printed name of person signing)	(Title of nercon signing)	

FILING FEE \$35